CENTRAL INTELLIGENCE AGENCY

INFORMATION REPORT

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COUNTRY	Bulgaria	REPORT			
SUBJECT	The Medical-Health Situation	DATE DISTR.	6 August 1954		
	in Sofia	NO. OF PAGES	14	25X1	
DATE OF INFO.		REQUIREMENT NO.	RD	20/(1	
PLACE ACQUIRED		REFERENCES	641076		
	This is UNEVALUATED			25X1	
	THE SOURCE EVALUATIONS IN THIS I THE APPRAISAL OF CONTENT (FOR KEY SEE REVE	IS TENTATIVE.		25X1	

- 1. Since 1950, there has been in effect in Sofia, as throughout Bulgaria, a capillary medical-health network. This includes frequent inspections and controls and provides for the direct and indirect care of the citizens and coordinated medical activities, with the aim of guaranteeing to the citizens immunity from the epidemics which, in the past, severely afflicted the public health and social well-being. The organization has its own technical hierarchy, closely connected with its administration, from which it gets its support. The Sofia network consists of the following:
 - a. One central directive organ (directorate); and
 - b. Six rayon directorates, which are the intermediate organs with directive and executive functions.
- 2. The central directorate consists of a directive council composed of the following:
 - a. One directoress, who also carries out a private practice within the district and is politically very influential;
 - b. Six hygienists who represent the six rayon medical-health directorates into which the city is divided;
 - One group of six pharmacists who represent the hospitals, the polyclinics, the sanatoriums, and the preventoriums of the capital; and
 - d. One group of consultants, not subordinate to the organization, who contribute in a very valuable way from their knowledge and experience during the discussions in program planning; these are selected from among the best physicians of the city.
- 3. The central directorate is directly subordinate to the Ministry of Public Health. It is located in the same building as the Medical-Health Directorate of the First Rayon. It carries out its activity by means of numerous congresses, in the course

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of which members of the Central Directorate, in the form of a college, discuss the most urgent and important health problems and, at the close of the congresses, issue directives which best meet the requirements. At these discussions, much value is ascribed to the technical opinions of the consultants, which are not infrequently openly opposed to the point of view of the directoress. In these cases, the problems under discussion are put to a vote with the eventual approval based on the majority of votes. When a majority cannot be reached, the problems are passed for settlement to the appropriate technical organs within the Ministry of Public Health.

- L. The medical college consists of 22 persons, as follows:
 - a. One director;
 - b. Six hygienists;
 - c. Six physicians; and
 - d. Nine "consultants," not subordinate to the organization.
- 5. If less than two-thirds of the members of the board are not present, or the "consultants" are absent, the discussions of the various problems are purely academic and no vote is taken on controversial problems because a vote is not considered valid if taken without the necessary quorum.

Rayon Services

- 6. Within the limits of each of the six rayons into which Sofia is administratively divided, there are an equal number of rayon medical-health directorates. These administer, by means of the medical doctors, a capillary network for inspection and control. They provide that the standards previously adopted and coordinated in the General Directorate are maintained throughout the rayon in each branch of social life for the defense of health and the battle against epidemics.
- 7. The rayon services are subordinate to the Central Directorate General and, in turn, have control over the following:
 - a. One rayon Council;
 - one chemical bacteriological laboratory in which are carried out all analyses deemed necessary;
 - c. One medical education Section, headed by a physician and a registered male nurse, which is responsible for distributing among the people health circulars containing simple and elementary articles relating to the development and application of the health-medical practice;
 - d. One civilian hospital;
 - e. One polyclinic;
 - f. One rheumatism Center;
 - g. One venereal Center;
 - h. One psychoneurology Center; and
 - i. One pediatrics Center.

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- 8. The rayon Council consists of the following:
 - a. One chief, who is normally the chief physician of the rayon;
 - b. One physician;
 - c. One hygienist; and
 - d. Three consultants.

It is the technical consultation unit for examinations, and outlines the various health problems of the rayon.

- 9. The hospital or the hospitals, the Centers, and the polyclinic are administratively subordinate to the Central Health Directorate. The rayon units, however, have free access into them for carrying out their activities of control and vigilance and to ascertain that the health rules approved by the Medical College of the Central Directorate have been completely and regularly carried out. Infractions or deficiencies noted are reported to the central unit when it is not possible to correct them through means at the disposal of the rayon Directorate.
- It may be grouped in a single building or may consist of separate buildings located in various points throughout the rayon. If a rayon does not have a hospital of its own, its patients are sent to a special hospital which substitutes in full for the rayon hospital. They are connected with the polyclinics, so that ambulatory patients coming to the polyclinics needing special care are referred as out-patients to these hospitals. The centers are larger than the hospitals and, each in its own field of care, is equipped both for hospitalization and for ambulatory care of patients.
- 11. Each of the six rayons has six medical practitioners who carry out inspection activities and intervene whenever it is deemed necessary; they may suspend activity which is not consonant with the medical-health regulations. To each of these is assigned a determined field for control, such as:
 - a. Health inspection in the branch of civil construction;
 - b. Analyses and bacteriological control of drinking water;
 - Inspection as to the quality and eatability of food products, as well as suggestions and counsel for its good preservation;
 - d. Health-sanitary control of schoolrooms and students;
 - control in the field of industrial production (heating, ventilation, lighting, etc.); and
 - f. Prophylactic measures for preventing and circumscribing epidemic limits for infectious diseases.
- 12. In order to obtain the position of hygienists, and consequently become State officials, candidates must be politically reliable and, naturally, hold the prescribed study degrees. The salary of medical hygienists is determined on the basis of the duties to be performed, and in consideration of the number of years in service; it varies from a minimum of 800 leva to a maximum of 1,400 leva (per month).

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13. Each rayon is divided into various "quarters." In each quarter, the residents, averaging 5,000 to 6,000 in number, are ensured medical-health care free of charge by the quarter physician. In cases out of the ordinary, as, for example, surgery, laboratory examinations, or assistance by a specialist, the quarter physician contacts the rayon physician so that the patient may receive the necessary care.

Medical Assistance

- li. Patients treated in hospitals or health centers pay no medical charges. When they are treated at home by the quarter physician, however, they must purchase their own medicines. Medicines generally are not lacking in supply, being obtained in major part from the USSR and in lesser amounts from Hungary and the United States. Workers sick at home receive, from their place of employment, a suitable subsidy for the purchase of necessary medicines. They may be absent from work up to nine months and receive their salary as usual during this period.
- 15. In case his illness is of a permanent nature or causes a partial disability, a worker is put under the jurisdiction of a medical Commission, which assigns him a pension if disability is total or a payment commensurate with his remaining physical efficiency if the disability is only partial. According to the standards provided for in the Labor Code, pensions are to insure the subsistence of the worker and are to be in consideration of the qualifications and salary of the worker at the time of his illness, the severity of the disability, and the number of years of pensionable work carried out.
- 16. All workers, at the beginning of their employment, are given a thorough medical examination to ascertain their full physical efficiency. Once a year they are given another complete physical examination, and once every three months they have a periodic medical examination.
- 17. With all the provisions adopted, as described above, satisfactory results have been attained without, however, bringing the situation into a proper condition.

 The number of places and Institutes for convalescing patients is still insufficient and the technical equipment of the hospitals is still outdated and in insufficient supply.

18.	Public health has become considerably better during the past years, as is shown by the lowering of the cases of illness and death, which previously were noted
	especially in childhood.

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